STATE OF NEW HAMPSHIRE



2018 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

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1111 0 9 2018

Name of Lobbyist(s)Amanda Grady Sexton Name of lobbyist's partnership, firm or corporation, if any: New Hampshire Coalition Against Domestic and Sexual Vio	NEW HAMPSHIRE DEPARTMENT OF STATE Ilence NH 03302 (State) (Zip Code)
(Name of partnership, firm or corporation) PO Box 353 Concord	NH 03302
(Name of partnership, firm or corporation) PO Box 353 Concord	NH 03302
(603) 224-8893 () e	e-mail amanda@nhcadsv.org
(Telephone) (Fax)	
111. This statement covers: (Choose one – file separate reports for each coreportable expense transactions which are not attributable to any one cli All reportable transactions occurring in the months prior to the reporting	ient).
	-
New Hampshire Coalition Against Domestic and Sext (Full Name of Client as it appears on the Lobbyist Registra	
<u>OR</u>	
All reportable transactions by the lobbyist (including the lobbyist's family unrelated to any particular client.	y), or the lobbying firm listed below which are
• • • • • • • • • • • • • • • • • • • •	25, 2018 [X] m 4/1/18 to 6/30/18
·	ary 30, 2019 m 10/1/18 to 12/31/18
V. There have been no fees received and no reportable transaction if this box is checked, complete just this form and submit it to the Secretary of Concord, NH 03301.	
VI. Check if additional reports are attached:	
If you have received fees or made expenditures, you must file Addendur	m A- Fees and Expenses
If you have paid an honorarium or reimbursed expenses, you must file A Expense Reimbursement	ddendum B- Report of Honorariums or
☐ If you, your firm, or your family has made political contributions, you m	ust file Addendum C- Political Contributions
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear of and complete to the best of my knowledge and belief. (Signature of lobbyist) Amanda Grady Sexton (Print Name of lobbyist)	or affirm that the foregoing information is true

PLEASE PRINT

STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

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NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s) Amanda Grady Sexton	DEPARIMENT
II. Name of lobbyist's partnership, firm or corporation, if any:	
New Hampshire Coalition Against Domestic and Sexu	nal Violence
III. Name of Client New Hampshire Coalition Against Domestic & Sexual Violence	
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses:	relations, or public relations services
a) Total of all fees received in this reporting period	a) \$
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$ ear)
c) Total of all fees received to date (Add lines a and b)	c) \$
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lessing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm. e aggregate total of all expenses paid expenses; (b) the aggregate total of all e: meals purchased during a business is than \$10 that is given to the person d with a value of \$25.00 or less); and orting period of greater than \$25.00 for the of greater than \$25, purchase of a or than \$25, but not greater than \$50, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$2,469.81
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$

d) Total expenses for this reporting period	d) \$	2,469.81
(Add lines a, b and c)		5
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$	2,339.82
f) Total of all expenses year to date	f) \$	4,809.63
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from period, including by whom paid or to whom charged.	lobbying fees	during this report
Paid to:	Amount:	
	\$	
<u> </u>	\$	
	\$	
	\$	
	\$	
	\$	
		-
Sworn Statement/Affirmation by Lobbyist		
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affir is true and complete to the best of my knowledge and belief.	m that the fo	regoing inform
is true and complete to the best of my knowledge and benef.		
	7	/5/18
(Signature of lobbyist)	(1	Date)
Amanda Grady Sexton		
(Print Name of lobbyist)		

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